## 

# FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

# IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

	rious Adonis Moore 16135171  f Plaintiff) (Inmate Number)	: :
USP ANY P.O Box (Address	enwood 3000 White Deer, PA 17887 S)	: :
(Name of	f Plaintiff) (Inmate Number)	(Case Number)
(Address	3)	• •
•	ned party must be numbered, ames must be printed or typed)	: : :
•	vs.	: CIVIL COMPLAINT
(1) United	1 States of America	: :
	d ) Ebbert, worden	FILED HARRISBURG, PA JUN 0 4 2018
(3) P. Remirez, Food Administrator (Names of Defendants)		JUN 0 4 2010
	ned party must be numbered, ames must be printed or typed)	PER DEPUTY CLERK
	TO BE FILED UNDER: 42	U.S.C. § 1983 - STATE OFFICIALS
	28 U	I.S.C. § 1331 - FEDERAL OFFICIALS
I. PRE	VIOUS LAWSUITS	
Α.	If you have filed any other lawsuits in fed number including year, as well as the na	eral court while a prisoner, please list the caption and case me of the judicial officer to whom it was assigned:
	N/A	

#### 

## II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

	In ord	ler to proceed in federal court, you must fully exhaust any available administrative remedies as to ground on which you request action.
	Α.	Is there a prisoner grievance procedure available at your present institution?No
	В.	Have you fully exhausted your available administrative remedies regarding each of your present claims?No
	C.	If your answer to "B" is Yes:
		1. What steps did you take? <u>Federal Tort Claim No. TRT-NER-2017</u>
		03665
		2. What was the result? Final Offer of \$200 made by
	D.	If your answer to "B" is No, explain why not:
IV. S	Em Ma (2) Na Em Ma (3) Na Em	ame of first defendant: United States of America  apployed as FBOP/warden at USP Lewisburg.  Apployed as P.O. Box 1000. 2400 Robert F. Miller Drive. Lewisburg. PA 17837  Ame of second defendant: David. J. Elobert  Apployed as Warden at USP Lewis burg  Attiling address: P.O. Box 1000. 2400 Robert F. Miller Drive Lewisburg. PA 17837  Ame of third defendant: P. Remirez  Apployed as Food Service. Administrator at USP Lewisburg  Additional defendants, their employment, and addresses on extra sheets if necessary)  MENT OF CLAIM
dat	tes and p	e as briefly as possible the facts of your case. Describe how each defendant is involved, including places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three f necessary.)
	1.	On or about 11-22-16. At USP Consisting located in Pennsylvania, I Demetrious
		Adon's Moore was and at all times mentioned here in a prisoner
		of and in the custody of the Federal Bourea of Prisons

Puritive damages in the amount of \$10,000.00

awarded to the plaintiff against the defendant(s)

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 30th day of May ,2018

(Signature of Plaintiff)

IX Statment of claim A. (continued)	Attachment #1
. The symptoms began with constant diaharea which I report	ed to the
medical staff on or about 11-24-2016, With in the preceding 24-ho	
symtoms dramatically increased to include extremely painful	
cramps, constant vamiling, diaharea that was sametimes involunt	
simontaneous with the vomiting, cold sweats that Kept me awake	
night, high Fever, sever headachs, Extreme dyhidration and the	
to hold down and foods or liquids	
I again alected the institutions medical staff and requ	vested to
have my blood and stool tested.	
T was re-housed (moved) along with 100's of other inn	nates who
also had contracted salmonella. To the basement level of X-block	
told due to falling ill of a "GI" infection " I was being placed	<u>in</u>
quarentine. Where because of the violent symptoms I was exp	periencing
I had to steep on the floor amongst bugs spiders and mice.	In order
to be in as close proximity to the toilet as possible when I a	vecild
make up vomiting or deficating involentarly. There were in	stances
where I never woke up in time and had to hand wash my on	
bodily waste out of my linen	***************************************
Because any liquid I drank ran through my bowels in less	then
two minutes or I otherwise vomited it back up. I was consta	untly
dybydrated. Unable to focus nor muster the streamth or energy to	<u>a</u>
excensise as I regularly do. Not even write a letter to my loved o	مدح
to let them know what was going through	
Eventually medical staff took a sample of my stool and	placed
me on an I.V and informed me I had contracted salmonelle	
Upon learning this and coupled with the substandard and unsanitar	<u>.7</u>
conditions of my confindment. I become played with thoughts	and
night mares that I am going to die in prison. Even after the	
aforesaid violent symptoms had passed. The thought that my u	
being is in neglegent hands, at any given time I am vaulners	
to fall victim to such a horrific illness has made me fearful	, of
Foods and meals ordered, or prepared by FBOP Staff	
At the time of this incident David ) Ebbert was worde	
USP Lewisburg and P. Remirez was the institutions Food Service	<del>*************************************</del>
Administrator.	
Joyce M. Horikawa, acting Regional Coursel reviewed my	
claim, And offered settlements of First \$100, then \$200.	Nothing Pollows